

# AUTO CR - LOG SUMMARY #1056716

TYPE: INFO

## Incident Finding / Overall Case Finding

Description of Incident	Finding	Entered By	Entered Date
It is reported that Officer Williams went to the above location to investigate a strong arm robbery. Officer Williams saw the subject, who matched the description of the robbery offender. Officer Williams tried to talk to the subject, who went inside the residence. Officer Williams followed the subject inside and again tried to talk to him. Officer Williams attempted to do a protective pat down but the subject pushed his arms away. Officer Williams then attempted to place the subject under arrest. The subject began fighting with Officer Williams, who pushed the subject and discharged his Taser. Officer Williams was then able to handcuff the subject.	(None Entered)		

## Reporting Party Information

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Reporting Party Third Party	DENHAM, LEVESTER	275		002 /	SERGEANT OF POLICE	M	BLK		

## Incident Information

Incident From Date/Time	Address of Incident	Beat	Dist. Of Occurrence	Location Code	Location Description
30-AUG-2012 11:38 - 30-AUG-2012 11:38		0224	002	290 - RESIDENCE	

## Accused Members

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Status	Initial / Intake Allegation
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## Other Involved Parties

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Involved Member	WILLIAMS, KIM D	10795		002 /	POLICE OFFICER	M	BLK		
NON-CPD	Victim/Subject						M	BLK		

## Involved Party Associations

Role	Rep. Party Name	Related Person	Relationship
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## Incident Details

CR Required?		Manner Incident Received?	PAX
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N	Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IPRA	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Civil Suit Settled Date:	
Notify Chief Administrator?	N	Notify Chief?	
Notify Coordinator?		Notification Does Not Apply?	Y
Notification Other?	N		
Notification Comments:			

## Incident Category List

Incident Category	Primary?	Initial?
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	Y	Y
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	N	Y

## Investigator History

Investigator	Type	Assigned Team	Assigned Date	Scheduled End Date	Investigation End Date	No. of Days
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## Extension History

Name	Previous Scheduled End Date	Extended Scheduled End Date	Date Certified Letter Sent	Reason Selected	Explanation	Extension Report Date	Approved By	Approved Date	Approval Comments
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## Current Allegations

Accused Name	Seq. No.	Allegation	Category	Subcategory	Finding
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## Situations (Allegation Details)

Accused Name	Alleg. No.	Situation	Victim/Offender Armed?	Weapon Types	Weapon Other	Weapon Recovered?	Deceased?
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## Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
ADMINISTRATIVELY CLOSED	28-SEP-2012 04:30	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
CLOSED AT C.O.P.A.	28-SEP-2012 04:30	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
PENDING ASSIGN TEAM	31-AUG-2012 12:14	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113 /	
PENDING SUPERVISOR REVIEW	31-AUG-2012 12:14	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113 /	
PRELIMINARY	31-AUG-2012 12:12	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113 /	edits
PENDING SUPERVISOR REVIEW	30-AUG-2012 05:47	HAYES, SHANNON	INVESTIGATOR 2 COPA	113 /	
PRELIMINARY	30-AUG-2012 03:39	HAYES, SHANNON	INVESTIGATOR 2 COPA	113 /	

## Attachments

No.	Type	Related Person	No. of Pages	Narrative	Original in File	Entered By	Entered Date/Time	Status	Approve Content	Approve Inclusion
1	FACE SHEET					HAYES, SHANNON	30-AUG-2012 03:39			
	DOCUMENTS - INTAKE INCIDENT		2	PO Williams	N	HAYES, SHANNON	30-AUG-2012 05:45	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		1		N	HAYES, SHANNON	30-AUG-2012 05:45	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		2	PO Williams	N	HAYES, SHANNON	30-AUG-2012 05:45	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		2		N	HAYES, SHANNON	30-AUG-2012 05:44	APPROVED		

## Review Incident

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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## Review Accused

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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## Accused Finding History

Accused Finding History

Accused	Allegation	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Finding	Finding Comments
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Accused Penalty History

Accused	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Penalty	Penalty Comments
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Findings

Accused Name	Allegations	Category	Concur?	Findings	Comments
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# FACE SHEET (Notification Date: 30-AUG-2012) - LOG #1056716

TYPE: INFO

## Reporting Party Information

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Reporting Party Third Party	DENHAM, LEVESTER	275		002 /	SERGEANT OF POLICE	M	BLK		

## Incident Information

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30-AUG-2012 11:38 - 30-AUG-2012 11:38		0224	002	290 - RESIDENCE	

## Accused Members

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Status	Initial / Intake Allegation
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## Incident Details

CR Required?		Manner Incident Received?	PAX
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N		
Motor Vehicle (V)?		Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IPRA	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Notify Chief?	
Notify Chief Administrator?	N	Notification Does Not Apply?	Y
Notify Coordinator?			
Notification Other?	N		

## Initial Incident Category List

Initial Incident Category	Primary?
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	Y
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	N

## Assignment History

Assigned To	Assigned Team	Investigator	Assignment Date/Time	Assigned By	Reason
IPRA	CIVILIAN OFFICE OF POLICE ACCOUNTABILITY	-	30-AUG-2012 15:39	HAYES, SHANNON	

## Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
ADMINISTRATIVELY CLOSED	28-SEP-2012 04:30	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
CLOSED AT C.O.P.A.	28-SEP-2012 04:30	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
PENDING ASSIGN TEAM	31-AUG-2012 12:14	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113 /	
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PRELIMINARY	31-AUG-2012 12:12	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113 /	edits
PENDING SUPERVISOR REVIEW	30-AUG-2012 05:47	HAYES, SHANNON	INVESTIGATOR 2 COPA	113 /	
PRELIMINARY	30-AUG-2012 03:39	HAYES, SHANNON	INVESTIGATOR 2 COPA	113 /	

CHICAGO POLICE DEPARTMENT  
ORIGINAL CASE INCIDENT REPORT

3510 S. Michigan Avenue, Chicago, Illinois 60653  
(For use by Chicago Police Department Personnel Only)  
CPD-11.388(6/03)-C

RD #: [REDACTED]  
Case ID: [REDACTED]  
EVENT #: [REDACTED]

INCIDENT	APPROVAL COMPLETE		
	IUCR: 0454 - Battery - Agg Po Hands No/Min Injury		
	Occurrence Location: [REDACTED] 330 - Other	Beat: 0224	Unit Assigned: 0224 RO Arrival Date: 30 August 2012 11:38
	Occurrence Date: 30 August 2012 11:43	# Offenders: 1	

NON-OFFENDER(S)	VICTIM - Government	
	Name: CHICAGO POLICE DEPARTMENT 5101 S Wentworth Ave Chicago, Illinois 312 - 747 - 8366	Contact Person: P.O KIM, WILLIAMS Beat: 0225
	CPD Officer: No	

SUSPECT(S)	Suspect # 1		In Custody	
	Name: [REDACTED]	Beat: 3100	Demographics	
	Res: [REDACTED]		Male	DOB: [REDACTED]
			Black	Age: 18 years
			5'06,	Birth Place: Illinois
			120 lbs ,	State Id - [REDACTED] IL
		Brown Eyes		
		Black Hair		
		Straight Hair Style		
		Medium Brown Complexion		
Injury Info				
Extent: Minor				
CFD First Aid Given: Yes				
Responding Unit: Ambulance 1		Hospital: [REDACTED]		
Physician Name: [REDACTED]				
<u>Type</u>		<u>Weapon Used</u>	<u>Description</u>	
Puncture Wound		Other	X26 TASER	

NARRATIVES	IN SUMMARY: R/O RESPONDED TO A CALL OF A MISSING PERSON LOCATED AT [REDACTED] WHICH IS [REDACTED] UPON A/O'S ARRIVAL OEC DISPATCHER HAD GIVEN OUT A DESCRIPTION OF SEVERAL STRONG ARM ROBBERY OFFENDERS THAT HAD ALREADY FLED SOUTHBOUND DOWN MICHGAN AND WAS POSSIBLY IN THE AREA OF 49TH TO 50TH ST. AS R/O ARRIVED AT [REDACTED] AND OBSERVED STANDING IN THE LOBBY OF [REDACTED] A SUBJECT FITTING A SIMILAR DESCRIPTION OF A POSSIBLE OFFENDER . R/O ENTER SAID LOCATION TO CONDUCT A FIELD INTERVIEW WITH THE SUBJECTS THAT WERE STANDING IN THE LOBBY . A/O ASKED ARRESTEE NOW KNOW AS [REDACTED] WHAT HIS NAME WAS . [REDACTED] REFUSED TO STATE HIS NAME. A/O'S ASKED [REDACTED] A SECOND TIME AT WHICH TIME HE STATED [REDACTED] A/O ASKED SUBJECT WHAT HIS LAST NAME WAS AT WHICH TIME SUBJECT STATED" FOR WHAT I AINT GOT TO TELL YOU THAT ." A/O ASKED SUBJECT IF HE HAD ANY IDENTIFICATION ON HIM AT WHICH TIME SUBJECT STATED I AINT GOT TO GIVE YOU SHIT . UPON ARRESTEE STATING THAT A/O PROCEEDED TO CONDUCT A PROTECTIVE PATDOWN AND TO SEE IF HE HAD ANY ID AND AS A/O REACHED FOR HIS OUTER PANTS POCKET SUBJECT SMACKED A/O'S HAD AWAY AND STATED"MAN DON'T GO IN MY POCKET I WILL FUCK YOU UP ." A/O THEN STATED TO ARRESTEE "ARE YOU THREATENING ME" A/O THEN STATED TO SUBJECT PUT YOUR HANDS BEHIND YOUR BACK IM PLACING	RD # [REDACTED]
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## NARRATIVES

YOU UNDER ARREST A/O GRABBED SUBJECT TO PLACE HIM UNDER ARREST AT WHICH TIME SUBJECT GRABBED A/O AND STATED "MAN I'M GOING TO KNOCK YOU THE FUCK OUT ." AT THAT TIME A/O AND OFFENDER BEGAIN TO STRUGGLE AS A/O WAS ATTEMPTING TO GAIN CONTROLL OF SUBJECT AT WHICH TIME SUBJCT STATED " I'M GOING TO KNOCK YOU THE FUCK OUT." A/O AT THIS TIME HAD NO BACKUP AND USED HIS TASER TO DEFEAT THE OFFENDERS ATTEMPT TO EVADE THE ARREST . AFTER THE OFFENDER WAS SUBDUED OFFENDER WAS HANDCUFFED AT WHICH TIME A/O NOTIFIED O.E.C AND REQUEST FOR MEDICAL ATTENTION FOR OFFENDER. BT. 220 WAS NOTIFIED AND ARRIVED ON THE SCENE . CFD#1 ARRIVED ON THE SCENE AND TRANSPORTED OFFENDER TO THE [REDACTED] OR MEDICAL TREATMENT. 002 DESK ARMSTONG#8725 TIME 11:48 , STATION SUPV. SGT. L. CHIBE#2181, TIME 11:49 , BT. 220 SGT. DENHAM#1986 TIME 11:39 . DETECTIVE DARCY#21131 HGSC. . BT. 271 FOLLOWED CFD1 TO THE UNIVERSITY OF CHICAGO TO SIT ON ARRESTEE.

NOTIFICATION: VIOLENT CRIMES DARCY Beat#: 5105F Star#: 21131 Emp#: Date: 30-AUG-2012 Time: 1258 NOT

## PERSONNEL

	Star No	Emp No	Name	User	Date	Unit	Beat
Reporting Officer	10795	[REDACTED]	WILLIAMS, Kim, D	[REDACTED]	30 Aug 2012 14:08	002	0224

## IUCR ASSOCS.

Victim	IUCR	Crime	Offender
CHICAGO POLICE DEPARTMENT	0454	Battery - Agg Po Hands No/Min Injury	[REDACTED]

OFFICER'S BATTERY REPORT  
CHICAGO POLICE DEPARTMENT

RD NO [REDACTED]

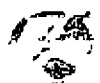
INSTRUCTIONS: This form is to be completed for all incidents when (1) a sworn member is the victim of a murder, aggravated battery, battery, aggravated assault, or assault while performing a police function either on-duty or off-duty, (2) a detention aide is the victim of a murder, aggravated battery, battery, aggravated assault, or assault while in the performance of his or her duties

"X APPLICABLE BOXES"			
OFFICER INFORMATION		INCIDENT INFORMATION	
NAME (LAST - FIRST - M I) <b>WILLIAMS, KIM D</b>		<input checked="" type="checkbox"/> 1 INDOOR <input type="checkbox"/> 2 OUTDOOR	
STAR NO <b>10795</b>		ADDRESS OF OCCURRENCE [REDACTED]	
POSITION <b>POLICE OFFICER</b>		CITY <input checked="" type="checkbox"/> CHICAGO <input type="checkbox"/>	STATE (If outside Chicago)
DATE OF APPOINTMENT <b>26-DEC-1989</b>	EMPLOYEE NO [REDACTED]	LOCATION CODE <b>330-OTHER</b>	
UNIT OF ASSIGNMENT <b>002</b>	BEAT/CALL NO <b>0224</b>	BEAT OF OCCURRENCE <b>0224</b>	
SEX <input checked="" type="checkbox"/> 1 M <input type="checkbox"/> 2 F	RACE <b>BLACK</b>	DOB [REDACTED]	DATE OF OCCURRENCE <b>30-AUG-2012</b>
HEIGHT <b>604</b>	WEIGHT <b>190</b>	TIME <b>11:43:00</b>	DAY OF WEEK <b>THURSDAY</b>
TYPE OF ASSIGNMENT WHEN BATTERY OCCURRED		NO. OF OFFICERS BATTERED <u>1</u>	
<input checked="" type="checkbox"/> 1 ON DUTY <input checked="" type="checkbox"/> A UNIFORM, PATROL DUTY <input type="checkbox"/> B UNIFORM, OTHER DUTY Describe _____  <input type="checkbox"/> C CITIZEN'S DRESS <input type="checkbox"/> D TACTICAL <input type="checkbox"/> E B I S UNIT <input type="checkbox"/> F SPECIAL EMPLOYMENT <input type="checkbox"/> G OTHER _____  <input type="checkbox"/> 2 OFF DUTY <input type="checkbox"/> 3 SPECIAL EMPLOYMENT <input type="checkbox"/> 4 SECONDARY / OTHER		WERE THERE ASSISTING UNITS ON SCENE? 1 <input type="checkbox"/> YES 2 <input checked="" type="checkbox"/> NO IF YES HOW MANY ASSISTING OFFICERS WERE PRESENT AT TIME BATTERY (EXCLUDING YOU OR YOUR PARTNERS) ? _____	
WORKING <input checked="" type="checkbox"/> A ALONE <input type="checkbox"/> B WITH ONE PARTNER <input type="checkbox"/> C WITH MULTIPLE PARTNERS How many? _____  PATROL TYPE <input checked="" type="checkbox"/> A SQUAD CAR <input type="checkbox"/> B FOOT <input type="checkbox"/> C BICYCLE <input type="checkbox"/> D APV/MOTORCYCLE <input type="checkbox"/> E SQUADROL <input type="checkbox"/> F OTHER _____		MANNER OF ATTACK  <input type="checkbox"/> 01 SHOT <input type="checkbox"/> 02 SHOT AT <input type="checkbox"/> 03 STABBED/CUT (INCLUDING ACTUAL ATTEMPT) <input type="checkbox"/> 04 STRUCK/BLUNT FORCE (INCLUDING ACTUAL ATTEMPT) <input checked="" type="checkbox"/> 05 OTHER (INCLUDING VERBAL THREATS)	
TYPE OF ACTIVITY		TYPE OF WEAPON/THREAT	
<input type="checkbox"/> A AMBUSH - NO WARNING <input type="checkbox"/> B TRAFFIC STOP/PURSUIT <input checked="" type="checkbox"/> C INVESTIGATING SUSPICIOUS PERSON <input type="checkbox"/> D DISTURBANCE - DOMESTIC <input type="checkbox"/> E DISTURBANCE - MENTAL PATIENT <input type="checkbox"/> F DISTURBANCE - RIOT/MOB ACTION/CIVIL DISORDER <input type="checkbox"/> G DISTURBANCE - OTHER <input type="checkbox"/> H MAN WITH A GUN <input type="checkbox"/> I PURSUING/ARRESTING OFFENDER (Specify) CHARGE _____ IUCR CODE _____  <input type="checkbox"/> J PROCESSING/TRANSPORTING/GUARDING A PRISONER (Specify) ORIGINAL CHARGE _____ ORIGINAL IUCR CODE _____  <input type="checkbox"/> K OTHER		(Check all that apply) <input type="checkbox"/> A FIREARM CALIBER _____ <input type="checkbox"/> 1 REVOLVER <input type="checkbox"/> 2 SEMI-AUTOMATIC <input type="checkbox"/> 3 RIFLE <input type="checkbox"/> 4 SHOTGUN  <input checked="" type="checkbox"/> D HANDS/FISTS <input type="checkbox"/> E FEET <input type="checkbox"/> F MOUTH (SPIT, BITE, ETC ) <input checked="" type="checkbox"/> G VERBAL THREAT (ASSAULT) <input type="checkbox"/> H OTHER (SPECIFY) _____  <input type="checkbox"/> B VEHICLE <input type="checkbox"/> 1 OFFICER STRUCK WITH VEHICLE <input type="checkbox"/> 2 ATTEMPTED TO STRIKE OFFICER WITH VEHICLE  <input type="checkbox"/> C KNIFE/OTHER CUTTING INSTRUMENT <input type="checkbox"/> I BLUNT INSTRUMENT	
TYPE OF INJURY TO OFFICER		FIREARM USE INFORMATION (Check all that apply)	
<input type="checkbox"/> A FATAL <input type="checkbox"/> B NON-FATAL - MAJOR INJURY (Broken Bones/Serious Lacerations/Internal Injuries) <input type="checkbox"/> C NON-FATAL - MINOR INJURY (Bruises/Swelling/Minor Abrasions) <input checked="" type="checkbox"/> D NONE APPARENT/NONE		<input type="checkbox"/> A OFFICER AT GUNPOINT <input type="checkbox"/> B OFFICER'S OWN WEAPON OBTAINED <input type="checkbox"/> C ATTEMPTED TO OBTAIN OFFICER'S OWN WEAPON	
LIGHTING CONDITIONS AT INCIDENT		OFFENDER INFORMATION	
<input type="checkbox"/> A DAYLIGHT <input type="checkbox"/> D DUSK <input type="checkbox"/> B NIGHT <input checked="" type="checkbox"/> E ARTIFICIAL LIGHT <input type="checkbox"/> C DAWN <input type="checkbox"/> 1 POOR <input checked="" type="checkbox"/> 2 GOOD	SEX <input checked="" type="checkbox"/> 1 M <input type="checkbox"/> 2 F		
		RACE <b>BLACK</b>	
		DOB [REDACTED]	
		CB NO [REDACTED]	IR NO
		WAS THE OFFENDER'S ACTIVITY DRUG RELATED? <input type="checkbox"/> 1 YES <input checked="" type="checkbox"/> 2 NO <input type="checkbox"/> 3 UNKNOWN	
		GANG RELATED? <input type="checkbox"/> 1 YES <input type="checkbox"/> 2 NO <input checked="" type="checkbox"/> 3 UNKNOWN	
		NO. OF OFFENDERS PRESENT? <u>1</u>	
		WEATHER CONDITIONS	
		<input checked="" type="checkbox"/> A CLEAR <input type="checkbox"/> D FOG / SMOKE / HAZE <input type="checkbox"/> G OTHER <input type="checkbox"/> B RAIN <input type="checkbox"/> E SLEET / HAIL <input type="checkbox"/> C SNOW <input type="checkbox"/> F SEVERE CROSS WIND	
		APPROXIMATE OUTDOOR TEMPERATURE <b>85 °F</b>	

FORCE NECESARY TO AFFECT THE ARREST.

REPORTING MEMBER - SIGNATURE	STAR NO	WATCH COMMANDER /UNIT COMMANDING OFFICER- SIGNATURE	STAR NO
WILLIAMS, KIM D	10795	RICHARDS, EDWARD A	240



**TASER**

PROTECT LIFE

**TASER Information**

Serial # X00-234604  
Model # X26  
X26 Software Version 22  
Dataport CD Version 17.9  
Record Date Range 08/30/2012 - 08/30/2012  
Computer Time Zone Central Standard Time  
\*DST  
Using Daylight Savings Time Yes

**Downloaded By**

Name Lisa Chibe  
Dept Chicago Police  
Rank Sgt  
Windows Version Windows XP  
Report Generated 08/30/12 12:31:20  
(local)

**Recorded Firing Data**

Seq	GMT Time	Local Time	Duration	Temp	Battery
0013	08/30/12 16:38:12	08/30/12 11:38:12	5	30	97

**Recorded X26 Time Changes**

Seq	GMT Time	Local Time	Change Type
0001	10/18/06 21:50:14	10/18/06 16:50:14	FROM
0002	10/18/06 21:50:15	10/18/06 16:50:15	TO
0003	01/01/00 01:09:39	12/31/99 19:09:39	FROM
0004	07/27/08 17:52:01	07/27/08 12:52:01	TO
0005	10/09/09 15:29:41	10/09/09 10:29:41	FROM
0006	10/09/09 15:17:36	10/09/09 10:17:36	TO
0007	07/13/10 15:21:15	07/13/10 10:21:15	FROM
0008	07/13/10 15:08:05	07/13/10 10:08:05	TO
0009	01/14/11 18:02:50	01/14/11 12:02:50	FROM
0010	01/14/11 17:45:08	01/14/11 11:45:08	TO
0011	01/06/00 05:24:10	01/05/00 23:24:10	FROM
0012	06/29/12 09:18:16	06/29/12 04:18:16	TO

End of Report.

about:blank

8/30/2012

CPD 0088032

## TACTICAL RESPONSE REPORT/Chicago Police Department

MEMBER INVOLVED	1 DATE OF INCIDENT <b>30-AUG-2012</b>		TIME <b>11:43:00</b>		2 ADDRESS OF OCCURRENCE [REDACTED]				3 LOCATION CODE <b>330</b>		4 BEAT/OCCUR <b>0224</b>												
	5 POSITION <b>9161</b>		6 LAST NAME <b>WILLIAMS</b>		7 FIRST NAME <b>KIM D</b>		8 STAR NO <b>10795</b>		9 SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		10 RACE CODE <b>BLK</b>		11 AGE [REDACTED]		12 HT <b>604</b>		13 WT <b>190</b>						
	14 DATE OF APPT <b>26-DEC-1989</b>		15 EMPLOYEE NO [REDACTED]		16 UNIT & BEAT OF ASSIGNMENT <b>002 0224</b>		17 DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off		18 MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		19 MEMBER IN UNIFORM? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No												
SUBJECT INFORMATION	20 LAST NAME [REDACTED]				21 FIRST NAME [REDACTED]				22 M I <b>D</b>		23 SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		24 RACE <b>BLK</b>		25 D O B [REDACTED]		26 HT <b>506</b>		27 WT <b>120</b>				
	30 WAS SUBJECT ARMED? <b>VERBAL THREAT (ASSAULT), HANDS/FISTS</b> <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No								31 SUBJECT INJURED? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No		32 SUBJECT ALLEGED INJURY? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No												
	35 CONDITION <input type="checkbox"/> 03 Hospitalized <input type="checkbox"/> 04 Not Hospitalized <input type="checkbox"/> 05 Refused Medical Aid																						
36 CHARGES PLACED [REDACTED]																		37 CB NO [REDACTED]		IR NO [REDACTED]		DNA <input type="checkbox"/>	
REASON FOR USE OF FORCE (Check all that apply)	38 DNA <input type="checkbox"/>		SUBJECT'S ACTIONS		PASSIVE RESISTER		ACTIVE RESISTER		ASSAILANT ASSAULT		ASSAILANT BATTERY		ASSAILANT DEADLY FORCE										
			DID NOT FOLLOW VERBAL DIRECTION <input type="checkbox"/> STIFFENED (DEAD WEIGHT) <input type="checkbox"/> OTHER _____		FLED <input type="checkbox"/> PULLED AWAY <input checked="" type="checkbox"/> OTHER <u>PUSHING R/O ARMS AWA</u>		IMMINENT THREAT OF BATTERY <input checked="" type="checkbox"/> OTHER _____		ATTACK WITH WEAPON <input type="checkbox"/> ATTACK WITHOUT WEAPON <input checked="" type="checkbox"/> OTHER _____		USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM <input type="checkbox"/> WEAPON <input type="checkbox"/> OTHER _____												
MEMBER'S RESPONSE			MEMBER PRESENCE <input checked="" type="checkbox"/> VERBAL COMMANDS <input checked="" type="checkbox"/> ESCORT HOLDS <input type="checkbox"/> WRISTLOCK <input type="checkbox"/> ARMBAR <input type="checkbox"/> PRESSURE SENSITIVE AREAS <input type="checkbox"/> CONTROL INSTRUMENT <input type="checkbox"/> OC/CHEMICAL WEAPON W/AUTHORIZATION <input type="checkbox"/> OTHER _____		OPEN HAND STRIKE <input type="checkbox"/> TAKE DOWN / EMERGENCY HANDCUFFING <input type="checkbox"/> OC CHEMICAL WEAPON <input type="checkbox"/> CANINE <input type="checkbox"/> TASER (Probe Discharge) <input checked="" type="checkbox"/> TASER (Contact Stun) <input type="checkbox"/> TASER (Laser Targeted) <input type="checkbox"/> TASER (Spark Displayed) <input type="checkbox"/> OTHER _____		ELBOW STRIKE <input type="checkbox"/> CLOSED HAND STRIKE/PUNCH <input type="checkbox"/> IMPACT WEAPON (Describe in Box 40) <input type="checkbox"/> OTHER <u>TASER</u>		KNEE STRIKE <input type="checkbox"/> KICKS <input type="checkbox"/> IMPACT MUNITION (Describe in Box 40) <input type="checkbox"/>		FIREARM <input type="checkbox"/> OTHER <u>TASER</u>												
WEAPON DISCHARGE INCIDENT	39 DNA <input type="checkbox"/>																						
	40 ADDITIONAL INFORMATION <b>TASER DEPLOYED TO DEFEAT ATTEMPT TO EVADE ARREST .</b>																						
	POSITION STAR NO UNIT																						
	41 WEAPON TYPE <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN <input type="checkbox"/> 04 SEMI-AUTO PISTOL <input type="checkbox"/> 05 CHEMICAL WEAPON <input checked="" type="checkbox"/> 06 TASER (Probe Discharge) <input type="checkbox"/> 07 OTHER																						
42 INCIDENT OCCURRED <input checked="" type="checkbox"/> Indoors <input type="checkbox"/> Outdoors																							
43 LIGHTING CONDITIONS <input type="checkbox"/> 01 Daylight <input type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input checked="" type="checkbox"/> 05 Poor Artificial <input type="checkbox"/> 06 Good Artificial																							
44 WEATHER CONDITIONS <b>CLEAR</b>																							
45 MAKE/MANUFACTURER																							
46 MODEL																							
47 BARREL LENGTH																							
48 CALIBER/GAUGE																							
49 TASER DART ID NO <b>DNA</b>																							
50 WEAPON SERIAL No (Include Letters) <b>X00234604</b>																							
51 CHICAGO GUN REG NO																							
52 IL FIREARM OWNER ID NO																							
53 HANDGUN CERTIFICATE NO																							
54 SPECIAL WEAPON CERTIFICATE NO																							
55 PROPERTY INVENTORY NO																							
56 TYPE OF AMMUNITION USED																							
57 NO OF WEAPONS DISCHARGED BY THIS MEMBER <b>1</b>																							
58 TOTAL NO OF SHOTS MEMBER FIRED																							
59 WHO FIRED FIRST SHOT <input type="checkbox"/> 03 OTHER (SPECIFY) <input checked="" type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER																							
60 WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO																							
61 NO OF CATDRIDGES/ SHOT SHELLS RELOADED																							
62 HOW WAS MEMBER'S HANDGUN WORN <input type="checkbox"/> 03 OTHER (Specify) <input type="checkbox"/> 01 RT SIDE (WAIST) <input type="checkbox"/> 02 LT SIDE (WAIST)																							
63 HOW WAS MEMBER'S HANDGUN DRAWN <input type="checkbox"/> 03 OTHER (Specify) <input type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW																							
64 SPECIFY METHOD/EQUIPMENT USED TO RELOAD																							
65 DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO																							
66 DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC)																							
67 DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 05 FT <input type="checkbox"/> 02 05 - 10 FT <input type="checkbox"/> 03 10 - 15 FT <input type="checkbox"/> 04 OVER 15 FT																							
68 PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN																							
69 POSITION OF MEMBER DISCHARGING WEAPON <input type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY)																							
CASE INFO.	72 NOTIFICATIONS (OC OR TASER INCIDENT) <input checked="" type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT & W C /DIST OF OCCUR NOTIFICATIONS (FIREARM INCIDENT) <input type="checkbox"/> OEMC <input type="checkbox"/> DESK SGT & W C /DIST OF OCCUR <input type="checkbox"/> OP COMMAND <input type="checkbox"/> DET DIV Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report																						
SIGNATURES	73 REPORTING MEMBER (Print Name) <b>WILLIAMS, KIM D</b>																						
	STAR/EMPLOYEE NO <b>10795</b>																						
SIGNATURE [REDACTED]																							
74 REVIEWING SUPERVISOR (Print Name) <b>DENHAM, LEVESTER</b>																							
STAR NO <b>1986</b>																							
SIGNATURE [REDACTED]																							
DATE REVIEWED <b>30-AUG-2012 15:03:40</b>																							
TIME																							

## WATCH COMMANDER/OCIC REVIEW

THE WATCH COMMANDER WILL COMPLETE THE REVIEW SECTION FOR 1 ) ALL INCIDENTS THAT DID NOT INVOLVE THE DISCHARGE OF A FIREARM, 2 ) FIREARM DISCHARGE INCIDENTS INVOLVING THE DESTRUCTION OF AN ANIMAL OR, 3 ) ACCIDENTAL DISCHARGE OF A FIREARM NOT RESULTING IN AN INJURY TO ANY PERSON

THE ADS WILL COMPLETE THE REVIEW SECTION FOR ALL INCIDENTS INVOLVING, 1 ) THE DISCHARGE OF A FIREARM OR IMPACT MUNITIONS BY OR AT A DEPARTMENT MEMBER EXCEPT FOR AN ANIMAL DESTRUCTION OR AN ACCIDENTAL DISCHARGE THAT DOES NOT RESULT IN AN INJURY TO ANY PERSON, 2 ) MEMBER'S USE OF FORCE BY WHATEVER MEANS THAT RESULTS IN THE DEATH OF A PERSON, 3 ) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 OR 2

75 SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

☐ DNA

☐ REFUSED

☒ UNABLE TO INTERVIEW (Specify Reason)

Subject is at

76 WATCH COMMANDER/OCIC RATIONALE FOR BOX 77 FINDING

Well within policy CR # 1056712 at 1529 hours 30 August 2012 from IPRA Investigator Hayes

77 WATCH COMMANDER/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION

☒ I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES

☐ I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED

LOG NO /CRNO \_\_\_\_\_ OBTAINED

78 WATCH COMMANDER/OCIC (Print Name)

**RICHARDS, EDWARD A**

SIGNATURE

DATE COMPLETED TIME

**30-AUG-2012 15:56:39**

79 DISTRIBUTION OF ORIGINAL TRR

A TRR PACKET, INCLUDING THE TRR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE OFFICE OF PROFESSIONAL STANDARDS

ATTACHMENTS - PHOTOCOPIES OF

☐ SUPPLEMENTARY REPORT

☐ I O D REPORT

80 TOTAL TRR's THIS EVENT No

☐ CASE REPORT

☒ OFFICER BATTERY REPORT

☐ CR INITIATION REPORT

**1**

☐ ARREST REPORT

☐ TO-FROM-SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)